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09/454,842

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## COMBINED DECLARATION & POWER OF ATTORNEY - U.S.A Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHODS FOR TREATING MAMMARY GLAND DISORDERS, the specification of which is a continuation-in-part of U.S. Serial No. 09/631,221, filed August 2, 2000, which is a continuation in part of application serial number 09/454,842, filed December 7, 19999, now U.S. patent number 6,139,845, and which:

	(check one)	[X] is attached hereto						
		[ ] was filed on as US Application Serial No						
		or PCT International Application No						
		and was amended on (if applicable)						
	I hereby state	e that I have reviewed and understand the contents of the above-identified						
	specification, including	the claims, as amended by any amendment referred to above.						
žė.	I acknowledge	the duty to disclose information which is material to the examination of this						
	application in accordan	ace with Title 37, Code of Federal Regulations, §1.56(a), including for continuation-						
i d	in-part applications, n	naterial information which became available between the filing date of the prior						
ij.	application and the na	ational or PCT international filing date of the continuation-in-part application. I						
ii.	hereby claim foreign pr	riority benefits under 35 USC § 119(a)-(d) or §365(b) of any foreign application(s) for						
distribution of the second	patent or inventor's certificate, or §365(a) of any PCT International application which designated at least							
	one country other tha	an the United States, listed below and have also identified below any foreign						
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ARTINI THE WORLD WITH THE THE THE THE THE THE THE THE THE T	Number  I hereby claim listed below.  Application No.  I hereby claim application(s) listed belowdisclosed in the prior USS, United States Code 37, Code of Federal Research	Country Day/Month/Yr filed) Priority Not Claimed  the benefit under 35 USC §119 (e) of any United States provisional application(s)  Filing Date  the benefit under Title 35, United States Code, §120 of any United States low and, insofar as the subject matter of each of the claims of this application is not United States application(s) in the manner provided by the first paragraph of Title e, §112, I acknowledge the duty to disclose material information as defined in Title egulations, §1.56(a) which occurred between the filing date of the prior application						
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December 7, 1999

 I hereby appoint STEPHEN DONOVAN, Registration No. 33,433 (to whom all communications are to be directed), at Allergan, Inc. (T2-7H), 2525 Dupont Drive, Irvine, CA. 92612, telephone number (714) 246-4026, facsimile number (714) 246-4249, and the below-named persons (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent, with full power to appoint associate attorneys:

<u>Name</u>	Registration No.
Carlos A. Fisher	36,510
Martin A. Voet	25,208
Robert J. Baran	25,806

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR:								
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SIGNATURE OF FIRST INVE	SIGNATURE OF FIRST INVENTOR				DATE:			
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FULL NAME OF INVENTOR:								
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SIGNATURE OF SECOND INVENTOR			DATE:	DATE:				
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